# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Pillar et al.

Title:

TURRET CONTROL SYSTEM

AND METHOD FOR A FIRE

FIGHTING VEHICLE

Appl. No.:

To be determined

Filing Date:

04/02/2004

Examiner:

To be determined

Art Unit:

To be determined

# United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450. EV 431600589 04/02/04 (Express Mail Label Number) (Date of Deposit) Roberta A. Cooper (Printed Name) (Signature)

CERTIFICATE OF EXPRESS MAILING

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# UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

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### Enclosed are:

- [X] Specification, Claim(s), and Abstract (81 pages including cover sheet).
- [X] Formal drawings (25 sheets, Figures 1-27).
- [X] Declaration and Power of Attorney (8 pages).
- [X] Assignment of the invention to Oshkosh Truck Corporation (7 pages).
- [X] Assignment Recordation Cover Sheet.
- [X] Check number 13880 in the amount of \$40.00 for Assignment recordation.
- [X] Application Data Sheet (37 CFR 1.76) (5 pages).

## The filing fee is calculated below:

	Claims as Filed		cluded in		Extra Claims		Rate		Fee
		Bas	sic Fee					•	
Basic Fee							\$770.00	=	\$770.00
Total	54	_	20	=	34	X	\$18.00	=	\$612.00
Claims:									
Independents .	2	-	3	=	0	X	\$86.00	=	\$0.00
TC N (14:1.	- Dd	Claim	(a)	t·			\$290.00	=	\$0.00
If any Multiple	e Dependent	Claim	(s) pres	ent:		+	\$290.00	<b>–</b>	
							SUBTOTAL:	=	\$1382.00
[ ]		Small	Entity 1	Fees	Apply (	subtr	act ½ of above):	=	\$0.00
·					T	OTA	L FILING FEE:	=	\$1,382.00

- [X] Check number 13881 in the amount of \$1,382.00 to cover the filing fee is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be

enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

By

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date

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Respectfully submitted,

\_\_\_\_\_

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